

**Application Data Sheet**

**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	PROTECTION OF SURFACES AGAINST CAVITATION EROSION
Attorney Docket Number::	2004P03943WOUS
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent	No
Appl.?::	

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: AUSTRIA  
Status:: Full Capacity  
Given Name:: KNUD  
Middle Name::  
Family Name:: THOMSEN  
City of Residence:: KOBLENZ  
State or Province of Residence::  
Country of Residence:: SWITZERLAND  
Street of Mailing Address:: LENGGSTRASSE 7  
City of Mailing Address:: KOBLENZ  
State or Province of Mailing Address::  
Country of Mailing Address:: SWITZERLAND  
Postal or Zip Code of Mailing Address:: 5322

Applicant Authority Type:: Inventor  
Primary Citizenship Country::  
Status:: Full Capacity  
Given Name::  
Middle Name::  
Family Name::  
City of Residence::  
State or Province of Residence::  
Country of Residence:: GERMANY  
Street of Mailing Address::

City of Mailing Address::  
State or Province of Mailing Address::  
Country of Mailing Address:: GERMANY  
Postal or Zip Code of Mailing Address:: 36199

**Correspondence Information**

Correspondence Customer Number:: 28204

**Representative Information**

Representative Customer Number::	28204
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/EP2004/009160	08/16/2004
This application	An application claiming the benefit under 35 USC 119(e)	60/542,292	02/09/2004

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::

**Assignment Information**

Assignee Name:: PAUL SCHERRER INSTITUT

Street of Mailing Address::

City of Mailing Address:: VILLIGEN

State or Province of Mailing Address::

Country of Mailing Address:: SWITZERLAND

Postal or Zip Code of Mailing Address:: 5232